XVI. *Account of an extraordinary Steatomatous Tumour, in the Abdomen of a Woman, by* P. Hanly, *M. D. Communicated by* Charles Morton, *M. D. Sec. R. S.*

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MRS. Reily, aged thirty ſix years, pale, tall, fleſhy, and formerly of a healthy conſtitution, was brought to bed of a ſtrong, lively daughter, on the twenty third day of May, 1770, in the pariſh of St. Anne, Dublin.

In the fifth month of her pregnancy, ſhe felt an uncommon lump in her ſtomach (as ſhe expreſſed it), about the ſize of a hen-egg, which did not then give her much pain or uneaſineſs, and ſhe was in hopes that her delivery would carry it off: ſhe had towards the end of her pregnancy frequent reachings, ſometimes puked, and became emaciated; three days after ſhe was brought to bed, ſhe found the lump and reachings had encreaſed; ſhe became very uneaſy, and ſent for me.

Upon examining her abdomen, I felt a conſiderable tumour contiguous to her ſtomach, which afterwards had greatly encreaſed, and was extended obliquely to her right ſide, as low as her navel; it lay immediately under the peritoneum and abdominal muſcles, and in the progreſs of its encreaſe, I could

plainly feel one large, and other ſmaller protuberances of a firm ſubſtance, in ſome meaſure reſembling the head and ſuperior extremities of a fœtus, It could be eaſily moved from ſide to ſide, without giving her any pain; but it reſiſted, and made her uneaſy, when I attempted to move it downwards: her abdomen appeard plump and full, as if ſhe had not been brought to bed; but the hypochondres were more prominent and diſtended, than the region below her navel. I ordered for her the ſimple bitter infuſion with abſorbent powders, and delayed giving deobſtruent medicines, till ſhe had recovered her ſtrength after lying-in. I alſo deſired her not to ſuckle her infant; but, as her huſband was poor, ſhe did not comply, by which means ſhe quickly became greatly exhauſted and emaciated.

In a fortnight after her delivery, ſhe got up daily, walked about her room, ſometimes went abroad, and continued to ſuckle her child; but the reachings returned at intervals, the tumour increaſed in ſize, its protuberances became larger and more diſtinct, ſhe was often reſtleſs, and in pain at night on lying in bed, had a hectic fever, and daily became weaker and more emaciated, with a ſharp pinched-up noſe, hippocratic countenance, ſmall, quick, weak, thread-like pulſe, loſs of appetite, and night ſweats.

In five weeks after her delivery, the tumour had greatly increaſed in all its dimenſions; and its protuberances, which to the feel ſeemed to reſemble the head, trunk, and extremities of an extra-uterine fœtus, became more palpable and diſtinct, as the abdominal muſcles from their diſtenſion became thinner. I brought ten phyſicians, ſurgeons, and accoucheurs

coucheurs to viſit her; and we were all ſo much deceived as to be of opinion, that the tumour was an extra-uterine fœtus: however, we were deterred from attempting the Cæſarean operation, from a conviction that ſhe was too weak, hectical, and reduced, to encourage any hopes of her recovery, in caſe it had been performed; and therefore we determined to leave the event to nature, eſpecially as we could perceive no motion of any particular parts of the tumour, though it had greatly increaſed, and as it was poſſible that it might be ſome other tumour.

She continued gradually declining; the tumour and ſymptoms increaſing, during May and June; and the twenty-third day of July following, I perceived a ſmall fluctuation of water in her abdomen, and gave her an intimation thereof, which determined her to procure another nurſe for her infant; but the aſcites daily increaſed, and in nine or ten days after, her legs and feet became œdematous, her night-ſweats ſtill continued, though her dropſy augmented, and ſhe languiſhed under the acute pains, more frequent reachings, hectic fever, loſs of ſtrength, want of appetite, and reſtleſs nights, except when ſhe took an opiate, which often proved a great relief and refreſhment to her.

Her poſture in bed now was half ſitting, half lying, which was the only poſition ſhe could bear without great pain and ſhortneſs of breathing.

About ſeven days before her death, ſhe was ſeized with a ſmart lax, which, in a few days, carried off part of the ſwelling in her left leg; ſhe became ſomewhat lighter, and leſs diſtreſſed in her breathing, which made her vainly hope, that her diſorder might be

be carried off in that manner; but the tumour, weakneſs, and other ſymptoms encreaſed, till the ſecond day of September inſtant when ſhe expired.

After her death, on opening her abdomen, in preſence of ſeven gentlmen of the faculty, we found about a gallon of water, and a large ſteatomatous tumour juſt under the peritoneum, near three inches in thickneſs, ſeven inches in length from her ſtomach to the obtuſe angle of her ribs, and in ſome places near five inches in breath from her ſternum to the vertebras of her back, full of prominences of different ſizes. It was of a hard conſiſtence, like tallow in its anterior part, but ſofter poſteriorly, and divided by thin membranes into numerous cells, which were diſtended with hard and ſofter fat; it weighed ſeven pounds, was of an irregular figure, adhered to, and compreſſed, the anterior part of her ſtomach, and was ſo firmly united to the inferior ſurface of the liver, that it could not be ſeparated from it without force. It preſſed and concealed the colon, and extended from the ſtomach by her liver to the right ovarium, and vertebras of her back: the ſmall guts were greatly ſqueezed, and moſtly forced towards the left ſide; and the anterior lobe of her liver was ſo compreſſed between the diaphragm and tumour, that it appeared flattened, ſmaller than uſual, and in a withered, decaying ſtate.

There was nothing præternatural in the matrix, or any of the other bowels; but they were greatly compreſſed, and the tumour, from its membranes and contained fat, ſeemed to be a production and diſtenſion of that part of the omentum, which adheres to the ſtomach, although it reached and adhered

hered to the right ovarium, liver, aorta, and colon, as well as to the ſtomach.

The operator was for ſome time in ſearch of the colon, before he found it, adhering to, and almoſt forming a part of, the poſterior edge of the tumour.

Dublin,
Sept. 6, 1770.

P. Hanly, *M. D.*